

HB 156 -- Informed Consent for Abortion

Co-Sponsors: Phillips, Reinhart, Baker, Ervin, Muckler, Cunningham (86)

This bill revises the provision pertaining to informed consent for an abortion.

Except in the case of a medical emergency, the bill prohibits a person from performing or inducing an abortion unless the treating physician has conferred with the patient and discussed the indicators and contra-indicators of the proposed abortion or drug or drugs used for the abortion, considering a woman's medical history and medical condition. The conference between the treating physician and the patient must occur at least 24 hours before performing or inducing an abortion.

For an abortion induced by drug or drugs, one conference between the treating physician and the patient must occur 24 hours prior to the writing or communication of the first prescription for a drug or drugs which are used to induce an abortion.

Prior to or during the conference, the patient is required to be screened for risk factors, which include any physical, psychological, or situational factors which would predispose the patient to, or increase the risk of, experiencing one or more adverse physical, emotional, or other health reactions to an abortion or drug or drugs used.

The bill requires that at the end of the conference, the treating physician and the patient are required to sign a written statement certifying that the screening and discussion have occurred and that the woman gave her informed consent freely and without coercion. All executed statements will be maintained in the patient's medical file which are subject to the confidentiality laws of Missouri.

The Department of Health and Senior Services is required to develop a model form that will be used by treating physicians. In the absence of the model form, treating physicians are not exempt from the requirements of the bill.

The bill also requires persons performing abortions to furnish and maintain proof of financial responsibility to the department. Proof of financial responsibility is defined as one of the following:

- (1) A written certificate from an insurance carrier certifying that a medical malpractice insurance policy is in effect, with limits of at least \$5,000 per occurrence and \$1 million per year

in the aggregate;

(2) A bond of a surety company conditioned for payments in the amount of at least \$5,000 per occurrence and \$1 million per year in the aggregate; or

(3) A certificate from the State Treasurer that the individual named in the certificate has deposited \$500,000 in cash or bonds with a fair market value of \$500,000 with the State Treasurer. The deposit of cash or bonds must be accompanied by evidence that no unsatisfied judgments exist against the depositor.

Individuals who provide proof of financial responsibility through a medical malpractice insurance policy or a surety bond must file a certificate annually with the department. The certificate must indicate that the policy or bond remains in force and effect without any decrease in coverage or amount of bond below the statutory minimums. Insurers and sureties cannot cancel insurance policies or surety bonds except after giving 10 days' notice to the director of the department. Depositors cannot withdraw deposits with the State Treasurer without furnishing proof of financial responsibility in the form of a malpractice insurance policy or a surety bond. The bill prohibits abortion facilities and hospitals from employing the services of a person to perform abortions if the person has not furnished or maintained proof of financial responsibility.

The provisions dealing with proof of financial responsibility become effective January 1, 2004.